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Worldwide Report

EPIDEMIOLOGY

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BAHRAIN

HEALTH MINISTRY PLANS STUDY ON HEART DISEASE

Manama GULF DAILY NEWS in English 6 Aug 86 p 5

[Article by Soman Baby]

[Text]

BAHRAIN'S Health Ministry is to complete a survey on factors affecting heart diseases on the island within the next three months.

The survey follows an increase in the number of deaths in Bahrain in recent years directly linked to heart disease.

Public health directorate reports show one third of the deaths in Bahrain last year — 408 out of 1,212 — were due to diseases of the

heart or circulatory system.

Of the deaths 325 were Bahrainis and 271 were male.

The survey is being conducted by Dr Abdul Hai Al Awadi, consultant cardiologist at Sulmaniya Hospital, in co-operation with the health education department.

Case histories of patients admitted to the hospital last year with heart diseases are being studied, and where possible interviews with such patients are carried out to

understand their life style and family backgrounds.

Health officials have pointed out that smoking is the main cause of heart disease in Bahrain.

High blood pressure, obesity, diabetes, environmental pollution, lack of exercise, hereditary factors, sexual anxiety and problems in the family have also been shown as other causes.

However, actual factors affecting heart diseases in Bahrain will be known only after the survey is completed.

/9274

CSO: 5400/4518

BAHRAIN

DRIVE TO REDUCE INFANT MORTALITY SET

Manama GULF DAILY NEWS in English 3 Aug 86 p 5

[Text]

MORE than 400 babies died in Bahrain during 1985, public health figures have revealed.

The infants were part of a 65,000 mortality total for children under five in the six GCC states.

And a United Nations regional study showed the deaths, mostly caused by unhygienic childbirth conditions, hereditary

diseases, diarrhoea and malnutrition, could have been avoided.

In Bahrain alone, 191 babies under the age of a week, 214 under one month and 27 under one year old died last year.

And now the UN has joined local doctors in a plea for greater efforts to bring down the infant death rate in all GCC states.

"The figures, though much

better than previous years, are still too high", the study said.

It also blamed bad eating habits, illiteracy, inadequate health and educational programmes in rural areas, lack of co-ordination among government ministries and hiring of foreign health workers for the infant deaths.

In Bahrain, a government health study found that 15 per cent of children under the age of six were underweight.

The head of the Health Ministry's nutrition unit, Dr Abdulrahman Musaiger, said new eating habits were causing the problem.

"Once a glass of camel's milk and a handful of dates used to supplement an Arab's meal. Now, with the arrival of American fast food, it tends to be a soft drink and French fries," he said.

/9274

CSO: 5400/4518

DENMARK

FREE NEEDLES FOR DRUG USERS TO COMBAT AIDS SPREAD

Copenhagen AKTUELT in Danish 7 Aug 86 p 9

[Article by Jorgen Holst]

[Text] The Copenhagen Municipal Authorities will earmark 700,000 kroner for the distribution of free needles to drug users.

"Denmark is probably the only country trying to combat AIDS spread in this manner," says Dr. Francis Zachariae, director of the Copenhagen Hospitals.

Dr. Zachariae expects the distribution to take effect already in the fall. The distribution of free needles may take place via the Copenhagen pharmacies during the daytime hours. In addition, three slot machines will be set up at various points on Vesterbro. The Pharmaceutical Society has agreed to arrange the distribution of needles.

"We expect the personnel of the pharmacies to be sufficiently familiar with their customers to avoid any problems in connection with the distribution."

Used Needle in Exchange for New One

"The idea of the arrangement is to avoid that drug users share their needles, causing an AIDS infection, if any, to spread. It is therefore important for drug users to hand in their used needles. The matter may be arranged in such a way that the drug user hands in a used needle when a new one is handed out to him.

We have previously discussed the possibility of handing out free needles in conjunction with infectious hepatitis among narcotics addicts," Dr. Zachariae says. "But, at the time, we abandoned the idea, as it might appear as an admission of narcotics abuse. It is now a question of AIDS, a disease which it is not possible to cure for the time being. To me, at least, there is therefore no doubt that we shall have to try the new possibility of combating the spread of AIDS," Dr. Zachariae concludes by saying.

A total of 40 million kroner will be earmarked under the coming budget for AIDS treatment in the capital.

The money will be used to expand the treatment at Hvidovre Hospital, Rudolph Bergh's Hospital and Bispebjerg Hospital.

An AIDS consultant will be appointed for the National Association of Homosexuals and Lesbians.

The number of cases of AIDS is expected to be doubled in Copenhagen in 1987. Copenhagen will have part of its costs covered through an equalization arrangement adopted by the Folketing. Under the arrangement, 85 percent of the expected expenditures for treatment of AIDS patients will be covered.

7262

CSO: 5400/2526

DENMARK

MORE DANISH WOMEN INFECTED WITH AIDS

Copenhagen BERLINGSKE TIDENDE in Danish 6 Jul 86 p 9

[Article by br]

[Text] Narcotics addicts using the needle are one of the risk groups, as far as AIDS is concerned, and the group where women are most exposed to the alarming disease, which typically hits homosexual men. Forty percent of narcotics addicts using the needle who are infected with AIDS are women.

By the end of the first half of the year, a total of 53 Danes had died from AIDS, and by then, a total of 90 cases of AIDS had broken out.

In the examinations which have been made of blood donors, of members of the risk groups, of prostitutes, etc., 1,300 cases of infection have been ascertained which, so far, have not shown any signs of the disease. But Dr. Henrik Zoffmann, chief surgeon at the State Serum Institute, says that the disease is expected to break out among at least 10 percent of these people. It may take as long as 7-8 years after the infection has been passed on to the person. However, there may be far more Danes carrying what for the time being may be a passive disease. A qualified estimate ranges between 5,000 to 10,000 persons. One does not have sufficient long-term practical experience to estimate these people's chances.

A New Aspect

According to Dr. Zoffmann, a new aspect of the Danish AIDS picture is the gradually fairly large number of women attacked by the disease. They are women living with bisexual men, with narcotics addicts using the needle or with bleeders who have contracted the disease via donor blood. Among narcotics addicts using the needle who have been infected with AIDS, 40 percent are women.

Where it is a question of female prostitutes carrying the infection, the risk of dissemination is alarming, although it has been found that there is a greater danger that a man will pass on the disease to a woman in a normal sexual intercourse than the reverse. A parallel pattern applies among male homosexuals.

DENMARK

BRIEFS

NATIONAL AIDS HOT LINE--The efforts to combat the fatal AIDS disease will be reinforced. Among the means is a new telephone service, costing 1 million kroner annually, the so-called hot line, which will provide information on the disease. Minister of Interior Knud Enggaard (Liberal Party) has asked the Finance Committee of the Folketing to support increasing the annual expenditures to combat the dreaded disease by approximately 4 million kroner. Fifty percent of this amount will be allocated to the National Health Service for dissemination of information on healthy living, for dissemination of information on AIDS and for the procurement of technical facilities. At the same time, a special AIDS secretariat, costing 330,000 kroner annually, will be set up, for the time being, for 3 years. Minister of Interior Knud Enggaard expects between 5,000 and 10,000 people in Denmark to have become infected with AIDS. Of these, 10 to 25 percent are expected to develop the disease. [TEXT] [Copenhagen BERLINGSKE TIDENDE in Danish 12 Aug 86 p 4] 7262

CSO: 5400/2526

EGYPT

BRIEFS

IMPORTED FOOD TESTED FOR RADIOACTIVITY--Cairo, Aug 28 (MENA)--All food commodities coming into the Egyptian harbours are released only after ascertaining their freedom of contamination according to international criteria, the Ministry of Health said today. In a statement issued today, the ministry said that all the samples which had been subjected to examination showed positive results for radioactive pollution with the exception of one shipment of deboned beef meat from West Germany which was positive for radioactivity and therefore rejected [sentence as received]. Ever since the incident of Chernobyl in the Soviet Union in April, the ministry has been cooperating with the atomic energy authority and other concerned authorities to make sure all the imported foodstuffs are free from nuclear radiation, the statement added. [Text] [Cairo MENA in English 1555 GMT 28 Aug 86] /8309

CSO: 5400/4610

ETHIOPIA

MINISTRY OF HEALTH ALERTS PUBLIC TO AIDS

Addis Ababa THE ETHIOPIAN HERALD in English 6 Aug 86 p 1

[Text] The Ministry of Health yesterday took the first major step of sensitizing the general public about measures that should be taken for the prevention of the "killer disease", generally known as AIDS.

Ministry officials and medical experts conveyed messages through the mass media calling on all people to protect themselves from the disease, Acquired Immune Deficiency Syndrome (AIDS), by taking essential precautions.

Comrade Dr. Getachew Tadesse, Vice-Minister of Health, said in a statement that the WPE and the Revolutionary Government had given directives so that the people would be fully protected from the disease. Accordingly, a national committee together with technical sub-committees had been established, Comrade Dr. Getachew said.

Comrade Dr. Getachew pointed out that the national committee had undertaken studies in North America and Europe as well as in other continents, and had collected the necessary information, so as to impose supervision and control at the ports and other entry points.

It was stressed that no tangible evidence has been found so far in the country of AIDS cases, although in certain neighbouring countries reports have been registered of victims who have died and are suffering from the disease.

In view of lack of protection through such means as vaccination, the ministry officials called upon individuals to observe appropriate sanitary measures and take precautions in practices related to sex, use of personal items such as tooth-brushes and razor blades, and even out-dated and harmful traditional applications of inefficacious medical treatments performed on children and adults.

/13104
CSO: 5400/184

GAMBIA

BRIEFS

AID TO COMBAT POLIO--Banjul, 21 Aug (GINS/PANA)--The British Government has donated 150,000 doses of polio vaccine to help the Gambian health authorities in their current vaccination campaign against polio, according to Mr Murray, the first secretary at the British High Commission in Banjul. Dr Philip Gwers, the Gambian medical officer of health who confirmed the British gift, also told GINS /news agency's full expansion unknown/ that the Gambia has asked for international assistance to determine the causes of the epidemic. Two specialists from the Centre for Disease Control in Atlanta, U.S.A., are expected in Banjul today to help investigate the case. He said that UNICEF was providing assistance to the vaccination drive, and that it was expected to provide about 200,000 doses of vaccine. The Control of Communicable Childhood Diseases (CCCD) organisation and Save the Children Fund have also provided assistance towards the campaign. Dr Gwers said it was important to determine the cause of the epidemic, as The Gambia was the leading country on effective immunization in West Africa, adding that polio had never been a problem. He said the current inoculation campaign, which started on 9 August, was expected to cover the whole country within 2 weeks. So far, he said, 48 children countrywide have been paralysed by polio with the largest number recorded in the western division. /Text/ /Dakar PANA in English 0929 GMT 21 Aug 86 AB/ 12228

CSO: 5400/185

GHANA

IMMUNIZATION PROGRAM FACES PROBLEMS

Accra PEOPLE'S DAILY GRAPHIC in English 30 Jul 86 p 8

[Text] **THE second phase of the immunisation programme in the Northern Region has run into problems holding back the progress of the exercise.**

Besides the shortage of vaccines, there is the problem of fuel to send the health personnel in the districts to the villages.

Investigations conducted by the GNA revealed that vaccines for diphtheria, whooping cough, tetanus and tuberculosis among others, have almost run short when the campaign has not even started in some districts.

On the fuel situation, it was learnt that the headquarters of the Ministry of Health promised to

supply fuel for the first phase of the campaign but this has not been done.

The Regional Health Directorate therefore, had to supply the fuel for the start of the campaign and it is learnt it cannot supply any more for the second phase.

Meanwhile, only Western Dagomba District has been able to start the second phase of the campaign.

However, the Principal Technical Officer of the Epidemiology Division of the Ministry of Health, Mr William Abdul Abass, said the first phase of the programme was successful.

He said 13,752 children were immunised against tuberculosis, 70,550 against polio, 60,860 against diphtheria, whooping cough and tetanus and 26,685 against measles.

A total of 51,077 pregnant women were immunised against tetanus. Mr Abass said about 90 per cent of the vaccines was used for the programme. — GNA.

/13104
CSO: 5400/183

GREECE

BRIEFS

AIDS CARRIERS--A total of 1,500 individuals who are AIDS carriers are walking the streets in Greece! Physicians at the Infectious Diseases Hospital are aware of many such cases. However, the government is not facing the problem. These individuals are able to transmit the terrible disease. Many of them have bitter feelings of rejection. They are not under threat of death themselves, but the disease they are carrying is deadly. One such example is the case of a 32-year-old Russian homosexual, Alex Kruppel [phonetic], who arrived in Greece as a political refugee two years ago. He has been confined to a room of the pathology clinic of the Infectious Diseases Hospital since day before yesterday. He is guarded by 5 policemen because he attempted to escape. However, Kruppel had freedom of movement until very recently. Physicians at the hospital have known about his condition since last December, when he had been hospitalized for the first time. He had undergone some kind of therapy and then released. However, as is well known, there is no cure for AIDS. [Excerpt] [Athens I VRADYNI in Greek 23 Aug 86 p 1]

/9716
CSO: 5400/2561

HONG KONG

KOWLOON DEATHS ATTRIBUTED TO VIRAL PNEUMONIA

Hong Kong HONGKONG STANDARD in English 31 Jul 86 p 2

[Text]

AT LEAST 255 people have died "suddenly and unexpectedly" in the past five years in Kowloon and the New Territories, but the cause of their deaths has only now been confirmed — interstitial pneumonitis.

The latest victims of the silent, deadly and as yet unstoppable killer are the two infants who died in a nursery in Mei Foo in February and March this year. A coroner returned this verdict on Tuesday.

The cause of death has been confirmed by a team of doctors from the Forensic Pathology Service attached to the Kowloon Public Mortuary who conducted a five year survey into the disease. They are consultant forensic pathologist, Dr David Yip, and medical and health officers, Drs Khin Khin Sein and Hau Kong-lung.

The team leader, Dr David Yip, told *The Standard* in an interview yesterday, the survey confirmed that interstitial pneumonitis or 'viral' pneumonia is the major cause of sudden and

unexpected deaths for victims under the age of 40.

The disease strikes suddenly, kills quietly and has been a cause of dismay among police and coroners for several years, Dr Yip said.

A majority of the victims — 186 of them — died in their sleep. He said the survey had revealed that those most prone to the disease were the very young. Of the victims, 94 were infants under 12 months and in fact 75 of them were under four months, Dr Yip said of the team's research findings.

He explained that unlike ordinary pneumonia, which is caused by bacteria, interstitial pneumonitis is a result of a virus and certain other unidentified organisms.

"It is generally believed that the normal influenza virus changes its structure all the time and sometimes, very rarely of course, this altered structure can effect some people this way."

He explained that it is really something to do with the immunity of an individual. Those with low im-

munity, like infants who have still not developed antibodies, may contract it.

But there is no known medical treatment for it or for any other viral disease for that matter," he said.

But Dr Yip was quick to re-assure the public that there was no cause for concern saying "it is definitely not at epidemic proportions."

In an attempt to allay possible fears he said the chances of being killed in a road accident or by a falling object are much higher than dying from the disease.

The team's research is part of a worldwide effort to identify the deadly virus and isolate a vaccine against it.

The disease is known to be common in the United Kingdom, and has also been known to strike foreigners in Hongkong who do not have the "natural immunity" to the influenza virus as most Hongkong residents do.

As for the symptoms, Dr Yip said, it is very difficult to tell, although most of the

victims had had "flu-like" symptoms.

While 186 victims died in their sleep, 40 developed symptoms in their sleep which ranged from convulsions to blood-tinged froth from the mouth and nose.

The survey which analysed all cases of natural deaths among those under the age of 40 also showed that while infants of both sexes were prone to the disease, in other age groups it was the males who were affected.

The survey also showed that it was not seasonal and seemed to appear sporadically throughout the year.

The virus affected the tissues of the lungs and in some instances, as in the case of the babies at the

Mei Foo nursery, also causes inflammation of the heart, known as myocarditis, Dr Yip said.

But the deadly organisms may only be identified once a perspective study is completed by the Departments of Morbid Anatomy and Microbiology of the Chinese University of Hongkong.

"The tests are very expensive, but until they are done, we will not know for sure what causes it," Dr Yip said.

Until such time as the researchers come up with something definite, Dr Yip said, "There is nothing to worry too much about. The chances of one suddenly falling dead from the disease are very, very, very small."

/13046
CSO: 5450/0194

HONG KONG

PRESS REPORTS ON SPREAD OF CHOLERA IN TERRITORY

Special Task Force Formed

Hong Kong SOUTH CHINA MORNING POST in English 5 Aug 86 pp 1, 2

[Article by Jimmy Leung]

[Excerpt]

THE Hongkong Government set up a special task force yesterday to crack down on illegal food hawkers to halt the spread of cholera.

And as more than 20,000 people rushed to Government health clinics to seek vaccinations against the disease, Government authorities appealed to Hongkong people not to panic.

Six more cases of cholera were confirmed yesterday by Dr S.H. Lee, who is the chairman of the new task force and Deputy Director of Medical and Health. He told a packed press conference that six new cases raised this year's total to 13 - including 11 local and two imported. Another nine suspected cases have yet to be confirmed.

Hongkong was declared a cholera-infected area on Saturday following the confirmation of four cholera cases.

Asked whether an elderly woman found dead in her East Kowloon flat on Sunday was Hongkong's first cholera fatality since 1979, Dr Lee said the cause of her death was still under investigation.

The medical chief also urged those without plans to travel outside Hongkong not to panic and rush in for cholera vaccinations.

However, by 4 pm yesterday, 20,260 people had been given cholera vaccinations in Hongkong - 18,035 at the eight public health centres and 2,225 at the three port health offices.

This was a drastic increase from 1 pm yesterday when 7,831 people were vaccinated - 6,346 people at health centres and 1,485 at the port health offices.

The public health centre hit hardest by the rush was the Shau Kei Wan Jockey Club Clinic where 4,000 people received inoculations by 4 pm.

Dr Lee, however, said the effectiveness of the vaccination was limited and only

lasted about four to six months with a 40 and 60 per cent level of protection.

"It does not give any kind of guarantee of protection. A person who receives a cholera vaccination may develop a false sense of security and, in fact, may be careless in the selection of food and drinks," Dr Lee said.

He added that being vaccinated has its side-effects.

"Vaccination can also enable a person to develop what we called a carrier state. In another words, he does not come down with the cholera but carries the organism with him...."

"This is very dangerous because he does not know about it and then he can spread the disease. That's why we don't advocate mass vaccination.

"The most effective way to prevent cholera is through personal, food and environmental hygiene," Dr Lee said.

Caution Against Exaggeration

Hong Kong HONGKONG STANDARD in English 6 Aug 86 p 3

[Text] THE Executive Director of the Tourist Association, Mr John Pain, strongly urged the press yesterday not to exaggerate the current outbreak of cholera in Hongkong.

"The tourist industry cannot afford false news on this matter," he said.

Speaking at a Rotary Club luncheon meeting he urged the press not to spread rumours, to be accurate, and "keep things in proportion".

Mr Pain described the current cholera situation as "a minor infection", compared with the cases that had occurred in the 1960's.

He added that the situation was "not serious at all" as there were just ten confirmed cases and 20 more suspected cases compared with the five-million population.

As the cases were found mainly in the industrial districts such as Kwun Tong and Sha Tin, where tourists seldom visit, "it would not reach them," he said.

Only a few "microscopic complaints", he added, were received by the Tourist Association after the proclamation of Hongkong as a cholera-infected area on Saturday.

"This is just a short term problem and not worth making any statement about," he said.

Moreover, Hongkong is an advanced country and people can seek proper medical help easily and "there is nothing to worry about", he added.

The Tourist Association has told all their overseas offices to give a true picture of the effect of cholera in Hongkong to foreigners as the overseas mass media

have also exaggerate the situation.

Most tourists interviewed in Tsim Sha Tsui yesterday, said they were not worried about the outbreak of cholera.

Two Australian nurses said they had no worry at all about contracting cholera as they were very careful with the food they ate.

"We are sure that all the food we eat is hygienic, but we do not think the food sold in the streets is," said one of them.

They said they have enjoyed their stay in Hongkong and the food is "delicious".

Meanwhile, most of the hotels in Hongkong reported no slacking off in business.

So far, no reservations have been cancelled because of the cholera scare, they said.

Alert on Hong Kong Island

Hong Kong SOUTH CHINA MORNING POST in English 7 Aug 86 p 1

[Article by James Sun]

[Text] THE territory's cholera outbreak spread to Hongkong Island yesterday as four more cases were confirmed.

A 31-year-old woman from North Point was confirmed as having cholera and the Urban Services Department immediately disinfected her home and her 11 family members.

A five-member action team conducted a massive clean-up operation on the street and backlanes in the surrounding area where the woman lived.

The department has also stepped up checks on food premises and raids against illegal cooked-food hawkers on the island.

Nine hawkers were arrested on Hongkong Island yesterday and will appear in courts today for illegal hawking and causing obstruction.

"These hawkers are unhygienic, unlawful, and unwelcome on our streets," an officer said.

Ms Wong Shuk-yin, who developed cholera symptoms on Sunday after having a meal at a North Point restaurant, was sent to Tung Wah Hospital the same day.

She was transferred to Princess Margaret Hospital's isolation ward yesterday.

Medical and Health Department officials believe the woman could have been infected with the disease in

Kwun Tong, where she worked.

If a second case is identified, it would be difficult to control the spread of cholera in the territory, medical officers said.

The medical pathologists were yesterday still examining about 100 kg of food samples seized by health inspector in Kwun Tong on Monday and hope to pinpoint the source of the infection.

Medical officers have still to confirm whether the 71-year-old woman found dead in her Sau Mau Ping home on Sunday died from cholera.

Yesterday's confirmed victims also include a 15-year-old boy from Hunghom.

a 21-year-old woman from Ngau Tau Kok, and a 51-year-old Japanese businessman in Tsim Sha Tsui. All were in satisfactory conditions last night in the isolation wards.

The new cases bring to 18 the confirmed cases recorded since last Thursday, making 21 cholera victims so far this year.

Seven of the 18 victims are residents of Kwun Tong, while the majority are believed to have contracted the disease in the industrial area.

Another 30 people, including a one-year-old girl, a

Vietnamese refugee, are still under observation in hospital.

The Urban Services Department and the Regional Services Department yesterday continued their territory-wide raids against illegal cooked-food operators.

In Kowloon alone, a total of 53 hawkers were arrested by general duties teams.

At black spots like Kwun Tong and San Po Kong, illegal hawkers stayed well away from the blitz.

The raids will continue until Hongkong is taken off the cholera-infected area list.

Confined to East Kowloon

Hong Kong SOUTH CHINA MORNING POST in English 9 Aug 86 p 1

[Article by Jimmy Leung]

[Text]

THE cholera outbreak is under control and there is no evidence of the disease spreading outside the east Kowloon area, a senior Government medical official said yesterday.

For the first time since Hongkong was declared an infected area on Sunday, there were no new cholera cases reported yesterday.

Twenty people are being treated for the disease and 33 more are under observation at the isolation ward of the Princess Margaret Hospital. The Deputy Director of Medical and Health Services, Dr S.H. Lee, said although more cases of cholera might be confirmed later, there were no signs of the disease spreading outside east Kowloon — particularly the Kwun Tong area.

"There are also no secondary cases in which the disease is passed on to another person from the original patient as he or she is isolated at the hospital," he said.

Dr Lee, who chairs the Co-ordinating Committee on Cholera Control set up on Monday, said a "common clue" was that of the 20 con-

firmed cases, 14 lived or worked in the densely populated Kwun Tong area.

The Deputy Director of Urban Services (environment and recreation), Mr Tommy Choy, said his department was carefully searching Kwun Tong and Tsz Wan Shan to crack down on illegal cooked-food establishments and had stepped up checks on licensed food premises.

He said USD health inspectors had checked about 700 licensed food premises every day this week.

Earlier yesterday, 50 USD officers raided illegal cooked-food stalls in Kwun Tong Road. Three lorry-loads of hawker goods were seized and all illegal structures were torn down.

A total of 48 illegal cooked food and drink hawkers were arrested by the general duties teams in raids on both sides of the harbour. They were all charged with causing obstruction and illegal hawking.

The Regional Services Department, meanwhile, made 33 arrests and issued 24 summonses of which six were against illegal food outlets.

The 552 inspections conducted by the department's staff in the same period also led to the seizure of 539 kg of food in 47 separate incidents.

Dr Lee also said the rush for cholera vaccination was subsiding. Up to 4 pm yesterday, 6,616 people had been inoculated compared to 11,493 on Thursday. More than 70,000 people had been vaccinated since Monday.

Dr Lee reiterated that vaccination was not the most effective way of preventing cholera as injections only provided about a 50 per cent protection level.

"The most effective way (of protection) is to be more careful on personal, environmental and food hygiene," he said.

Dr Lee said the special task force set up to crack down on illegal hawkers and control the spread of the disease would not be disbanded when Hongkong is taken off the infected list.

He said Hongkong's recent cholera outbreak was different from a severe outbreak of "classical cholera" which killed 246 people in 1946.

Case in New Territories

Hong Kong SOUTH CHINA SUNDAY MORNING POST in English 10 Aug 86 pp 1, 2

[Text]

HONGKONG'S cholera outbreak spread to the border area yesterday as one more case was confirmed in the northern New Territories.

And late last night health authorities were investigating a suspected case in Macau, where a 22-year-old woman was rushed to hospital. If confirmed, it will be the enclave's first case for eight years.

An anti-cholera team immediately disinfected the victim's residence in Yuen Long after the 72-year-old man was confirmed as having contracted the disease.

The elderly man was in Princess Margaret Hospital's isolation

ward last night in a satisfactory condition.

The health team will thoroughly investigate the daily eating habits of the victim in a bid to trace the source of the infection.

Meanwhile, as concern over the cholera outbreak continues, demand for distilled water has risen sharply over the past week despite the increased chlorination in Hongkong's tap water to kill bacteria.

Group managing director of A.S. Watson Co Ltd, Mr Ian Wade, said sales of distilled water by the company had risen by 60 per cent in the first five days after Hongkong was declared a cholera infected area.

Watson's three distilled water plants are operating around the clock to cope with demand but Mr Wade said the company still was finding it difficult to keep pace with demand.

Mr Wade said that because of fear of possible contraction from unhygienic food, consumers had been turning to larger operators for more hygienic goods.

The company, which runs the Park'n Shop and Watson's store chains, has the biggest share in Hongkong's market in distilled water.

The stores have also been benefited by tremendous sales increase in various commodities including cleansing items, fresh and frozen food, hygienic products and medicines.

The Dairy Farm Co Ltd, which runs the Wellcome chain of supermarkets, has also found increases in products including antiseptics, bottled water and disinfectants in the past few days.

Meanwhile, the Urban Services Department and the Regional Services Department continued yesterday their stepped-up raids against illegal cooked-food hawkers.

Mr Yip Wing-sheung, 32, was taken to hospital where he was treated and discharged. Police are still searching for his assailant.

To ensure the food trade is complying with necessary hygiene regulations, the USD and RSD also launched a blitz on unclean restaurants and other food premises.

So far in the urban area more than 4,000 licensed food establishments, including cooked-food stalls, have been inspected since the crackdown began on Monday, a USD spokesman said yesterday.

A total of 54 summonses have been served and 3,661 warnings issued to food premise operators for having contravened the food hygiene regulations, he said.

The spokesman also said a daily average of about 80 inspectors were mobilised for the operations in Kowloon and on Hongkong Island.

Medical and Health Department officials believe that, although more cases of cholera might be confirmed later, there have been no signs that the disease was contracted by any of the victims outside Kowloon and particularly the Kwun Tong area.

During the past week's inspections, health inspectors paid particular attention to the cleanliness of the premises, personal hygiene of food handlers and proper food storage and handling, the spokesman continued.

In addition, the health inspectors brief operators and food handlers on the basic principles of food, environmental and personal hygiene.

To put the message across to people in the food trade, health inspectors are also distributing copies of a comprehensive pamphlet setting out guidelines on personal and food handling hygiene.

So far, copies have been handed out to about 3,000 food premises operators who have attended the food hygiene seminars, now being held in conjunction with this year's food hygiene campaign.

About 1,000 more food outlets operators are expected to attend the seminars before the campaign ends.

Japanese Discharged, New Case Reported

Hong Kong HONGKONG STANDARD in English 12 Aug 86 p 5

[Article by Cecilia Or]

[Text] THE Princess Margaret Hospital discharged its first cholera patient in the current outbreak yesterday, even as a new case of cholera was confirmed.

The discharged patient was a 49-year-old Japanese man from Tsim Sha Tsui. He was confirmed to be suffering from cholera on July 30 and was the fourth case this year.

The new case — that of a 15-year-old boy who contracted the disease overseas — brought the total number of confirmed cases to 22 yesterday.

The teenager developed symptoms of diarrhoea and vomiting last Tuesday, one day after he returned from a short trip to south China.

He was first admitted to Queen Elizabeth Hospital and transferred to the Princess Margaret Hospital the next day.

Health officers had disinfected his home in Mong Kok last week.

Like the 21 other patients, his condition was reported satisfactory yesterday.

The last confirmed local case of cholera was reported

on Saturday and the victim was a 72-year-old man from Yuen Long.

Thirty-three suspected patients are still in the isolation ward of the Princess Margaret Hospital for observation.

Meanwhile, the number of people who sought inoculation at the eight Government clinics and the Port Health Offices dropped drastically yesterday.

Up to 4 pm, only 1,684 people were inoculated, with the highest number, 310, reported at the Kwun Tong Jockey Club Health

Centre followed by the Yau Ma Tei Jockey Club Polyclinic where 285 people were inoculated.

Last Monday, more than 18,000 people flocked to the eight clinics and the two Port Health Offices for inoculation.

A total of 92,283 people were inoculated last week.

Despite the cut in the number of people receiving free vaccination in government clinics, the demand for vaccines in the private sector remained high.

Besides the daily ration of

200 bottles, the Medical and Health Department gave private doctors an extra 500 bottles, or 25,000 adult doses, yesterday to relieve the heavy demand.

More than 800 doctors have been registered with the Hongkong Medical Association for vaccines and the list was booked up to Thursday.

The spokesman for the Hongkong Medical Association, Dr Kevin Tong, explained that private doctors would keep some vaccines at hand even if only one or two persons ask for it.

"Now that Hongkong is

declared a cholera-infected area, doctors would want to keep some vaccines in their clinics so that when a person comes along asking for an inoculation, there is always some vaccine to serve him," he said.

Meanwhile, the Urban Services Department's General Duties Team arrested 19 illegal hawkers in 11 urban districts yesterday, charging them with causing obstruction and illegal hawking.

And 145 illegal cooked food and drinks hawkers were arrested over the weekend.

Better Prevention Urged

Hong Kong SOUTH CHINA MORNING POST in English 6 Aug 86 p 8

[Editorial: "Coping With the Cholera Outbreak"]

[Text]

CHOLERA is a disease endemic to the underdeveloped world, where modern medicines, community hygiene, water reticulation and sewage disposal are either lacking or absent. It is all the more shocking, then, for the disease to reappear suddenly in Hongkong, the so-called Manhattan of the East, and in such force to lead to the overnight declaration of the territory as a cholera-infected area. There is no possibility of the disease taking anything like the hold it has in some areas of the region, where it regularly kills tens of thousands of people a year, but nevertheless there is a public fear that the disease could spread, as indicated by the long queues outside the inoculation centres.

Medical and health authorities are stressing that inoculations do not provide a guarantee of complete protection, but the public has decided that 60 per cent protection is better than none at

all. They are right, as any cursory observation of Hongkong's crowded living and working conditions would reveal. If an infectious disease did take hold, it would spread like wildfire through the tenements of Kowloon and Hongkong.

Cholera is spread basically through contaminated food and water, or through personal contact. The present blitz on unhygienic food sellers and street hawkers is focusing on a primary centre for spreading the disease - which leads one to the not unjustifiable conclusion that the health authorities are shutting the door after the horse has bolted.

It is fact that cholera is endemic to the region; that the many travellers to and from Hongkong are likely to contribute to its spread, especially in our hot, humid summers; and that unlicensed or unregulated street vendors are suspect. In view of these rather obvious facts, it would seem that the Government should

have acted long ago to improve supervision of food outlets in an attempt to prevent the spread of disease, rather than acting after an outbreak has occurred. A good shake-up of our regulations and attitudes towards unhygienic food preparation is long overdue.

The declaration of Hongkong as a cholera-infected area, quite apart from the personal tragedies of those who contract the disease, does no good for the tourist image on which so much of this city depends. The government acted quickly and responsibly once the cholera outbreak was identified, but it would have done Hongkong more of a service if its vigilance had been such that the disease did not have the chance to take hold. In addition, the present outbreak might also do more to force the authorities to tackle seriously the problem of pollution, which has been virtually ignored until recently. Clean streets and waters are a necessity, not a luxury, for any healthy city.

The government also seems reluctant to encourage mass inoculations. This is understandable, in view of the cost and the fact that inoculation is not completely effective, the protection it offers is of limited duration, and there is apparently a possibility of some people who receive the inoculation becoming unwitting carriers of the disease.

However, many of the public see all this as better than the alternative, which is little more than hoping one does not catch it. If the present outbreak worsens, the government will have to rethink its policies, if for no other reason than to prevent panic. The

eight inoculation centres and three port health offices providing inoculations are not enough, judging by the heavy attendances over the past two days.

Naturally total support must be given to the Government's call for strict observance of hygiene, and its renewed inspections of restaurants, food stores and street vendors. However, its apparent move to discourage people to seek inoculation is questionable.

A point to be considered is that the cholera menace is not confined to Hongkong. Indeed, it is most likely that the present outbreak was imported into the territory, most probably from the China mainland where numerous cases have been reported, and the tropical countries of Southeast Asia. During the summer vacation, thousands of local residents are holidaying in these countries and it would be irresponsible to discourage them from inoculation.

The best way to tackle the outbreak is to open more inoculation centres with more staff from other sections of the medical department, coupled with a campaign to educate the public on the need for personal hygiene, and intensified inspection of places that handle food and beverage.

To reduce the workload of these Government-operated centres, the population should be encouraged to seek inoculation at private practitioners' clinics but a standard charge acceptable to most people should be assessed.

The Government must aim at preventing panic, and at the same time it must take steps to ensure this scourge does not gain a foothold in Hongkong.

KENYA

109 CASES OF AIDS CONFIRMED

Nairobi DAILY NATION in English 12 Aug 86 p 24

[Article by Otula Owuor]

[Excerpts]

There are 109 AIDs cases in Kenya and four new ones are being confirmed every month, the Director of Medical Services, Dr Karuga Koinange, told a press conference in Nairobi yesterday.

The press briefing was part of the Ministry of Health's campaign to educate Kenyans about the deadly Acquired Immune Deficiency Syndrome Disease.

Dr Koinange said that 65 per cent of Aids cases are in Western and Nyanza provinces, 30 per cent Central Province and five per cent in Rift Valley, Coast and Eastern provinces. The North Eastern had no confirmed Aids cases, he said.

Dr Koinange said Kenyans should avoid sexual relations with strangers. The disease has no cure and is fatal, he said.

The disease is mainly spread through sexual contact and not through biting insects, food or hand shakes, he said. The youngest Aids victims is a one-and-half-year-old child while the oldest is 46. The majority were between 25 to 35 years old, he said.

He said some of the past reports on Aids as contained in medical journals like *Lancet* were inaccurate. Some researchers have written letters correcting the data they had obtained because they had used Aids tests that gave false hopes.

About 30 per cent of the Aids cases were aliens. However, he said, nobody is exempt from Aids and all must take cautions.

~ Dr Koinange said the first Aids case in Kenya was in August 1983. It was detected in an alien. The first Kenyan citizen with Aids was found in 1984. Our Ministry has not hidden anything and the Government has been open about it because we even made a Ministerial statement about Aids in Parliament, he said.

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CSO: 5400/187

MACAO

AIDS CASE REPORTED IN MACAO, REPORT DENIED

Weekly Says No Doubt

Hong Kong SUNDAY STANDARD in English 10 Aug 86 p 1

[Article by Leonel Borralho]

[Text]

TWO cases of AIDS have been confirmed in Macau, according to the Portuguese weekly *Tribuna*.

The journal, in yesterday's issue reported that two cases of AIDS — both inmates of the Central Prison — had been confirmed in Macau and that doctors, however, considered there was no reason for alarm.

"There is no margin for doubt," the weekly said after tests had been conducted by the Medical and Health Department in Hongkong.

The cases, according to the weekly, involved "one Portuguese and one Chinese inmate of the Central Prison."

The Director of the Macau Central Prison, Mr Jorge Dias, told *The Standard* last night that he has no official knowledge of AIDS patients inside his prison.

But he confirmed that blood tests on all Macau prisoners were being conducted in Hongkong and that there were no official reports yet.

"The fact that I have not received any official report so far does not mean there are no cases of AIDS in the prison," Mr Dias added.

Prison Director's Denial

Hong Kong SOUTH CHINA MORNING POST in English 11 Aug 86 p 24

[Text]

MACAU: The Director of Macau Prisons, Dr Cordeiro Dias, has denied a report that two prisoners at the central prison have AIDS.

He said inmates were often sent to hospital, but no cases of acquired immune deficiency syndrome had been

recorded.

The report appeared in Macau's Portuguese-language weekly *Tribuna* on Saturday.

Dr Dias said the Macau Public Health Department had assured him no AIDS had been found.

MEXICO

BRIEFS

DANISH HEALTH SECTOR AID--The Danish Foreign Ministry will grant 10 million kroner in state aid to help reconstruct the health sector in Mexico, the capital of which, Mexico City, was severely hit by two major earthquakes in September of last year. Foreign Minister Uffe Ellemann-Jensen (Liberal Party) has requested the Finance Committee to grant the 10 million kroner, which, according to an agreement between the Mexican Ministry of Health, the Danish Red Cross and DANIDA, will be used for the purchase and transport of Danish-produced hospital equipment for newly built hospitals. [Text] [Copenhagen BERLINGSKE TIDENDE in Danish 12 Aug 86 p 4] 7262

CSO: 5400/2526

NORWAY

OSLO AUTHORITIES ACT TO COMBAT AIDS, ASK GOVERNMENT FUNDS

Treatment Centers Would Double

Oslo AFTENPOSTEN in Norwegian 9 Aug 86 p 8

[Article by Elisabeth Sem Christensen: "AIDS Measures Among Oslo's Narcotics Addicts"]

[Text] The City of Oslo wants to stake a good 30 million kroner this year and next year on measures for narcotics addicts, in order to prevent the spread of the AIDS infection. For this reason the Ministry of Social Affairs is asking for a grant of 6.6 million kroner this year and a good 16 million for 1987. Among other things, the city will double the capacity of treatment centers.

Health Director Torbjørn Mork tells AFTENPOSTEN that the State's subsidy will be of a considerable order of magnitude, but is given on certain conditions. The City of Oslo is prepared to begin several of the measures in the course of September. Professionals are ready to begin in the planned posts. The City of Oslo asked the Ministry of Social Affairs for a subsidy more than a month and a half ago, and City Councillor Ole B. Hovind points out that there is no time to lose in getting started. According to American AIDS experiences, it is important to bring resources into action for needle-using addicts, he says. The thinking is that they are subject to the tyranny of drugs, which is stronger than the fear of disease. Homosexuals, who are regarded as the other risk group, will more probably change their lifestyle and protect themselves against the disease in this way.

600 Infected

Studies indicate that about 600 needle-using drug addict Norwegians have already been infected with the AIDS HIV virus. Presumably a good 400 of these are Oslo residents. Because Oslo has the greatest drug abuse problems in the country and because the AIDS epidemic has a foothold first and foremost here, the city councillor thinks that it is a central national objective to attempt to prevent spreading of the infection in the city. The municipality will assume the investment expenses for the proposed measures, about one third of operating expenses, and assumes that the State will cover the rest.

The matter has not yet been discussed in the Oslo City Council, but Hovind is counting on tentative approval by the executive committee.

Treatment Capacity for 70 More

According to the plan the money will go to treatment capacity for 68 to 70 more before the end of 1987. City Councillor Hovind admits that this is far from sufficient in comparison with the need.

"But this is what we can manage at the moment," he says.

The first 10 longterm facilities can open already during the course of next month, at Veslelien Sanitarium for the Care of Alcoholics. A planned acute care station with three to five detoxification facilities will begin operating, it is hoped, simultaneously at a temporary site. In the longer term the station will be located at Ullevål Hospital. Oslo's plans include an additional 40 new units at Veksthuset [The Greenhouse] and 20 in the new Hov Group. Treatment Home T-5 will expand with between three and five custodial care facilities, but does not need State support.

A group custodial care facility for four to five persons has also been planned at Vindern Psychiatric Clinic, and Oslo hopes in addition to set up two new psychiatric teams for youth. The outside section will be stepped up to the 1982 level, in accordance with Oslo's wishes, and will get six and one half new posts. For the time being three million kroner have been earmarked for support and information work.

MP Suggests Compulsory Measures

Oslo AFTENPOSTEN in Norwegian 9 Aug 86 p 8

[Article by Carsten Carlsen: "'Affects All'"]

[Text] "It is totally necessary for each of us to lead a more moral life. It is a question not of sexual morals but simply of social morals. The AIDS epidemic is perhaps the most serious epidemic we have faced, and the responsibility for taking measures which can slow the spread of this disease rests on both the authorities and politicians."

The Conservative Party's foremost social policy spokeswoman, Storting Representative Annelise Høegh, believes compulsory measures can be called for against those who do not themselves display the necessary responsibility. At the same time she cautions against measures which do not have proper consideration for the relationship of confidence between doctor and patient, and against measures which cannot be followed up with an offering to those who are struck.

Medical Director Per Nyhus has advocated the internment of infection carriers, an AIDS test for everyone in the hospital, and criminal liability for infecting others. Annelise Høegh thinks that this is going too far, precisely because his proposal destroys the patient's confidence in physicians.

"It is of no use to intern people when there is nothing to offer them. At the present there is no cure for the disease and it is not known who is infected. It is said that the incubation period is five years, but this is, after all, because the disease has been known of for only five years; for all we know the incubation period could be either 10 or 20 years. All the same it is necessary to have coercive measures against people who display a totally irresponsible way of life. I am thinking here especially of drug addicts and to some extent also of prostitutes," Annelise Høegh says.

AIDS Register Routines Reevaluated

Oslo AFTENPOSTEN in Norwegian 12 Aug 86 p 16

[Article by Hilde Harbo: "AIDS Registers to be Examined"]

[Text] The Data Inspectorate is now examining the routines for the registration of AIDS-infected people at Ullevål Hospital and the Oslo Board of Health. Both have stored information on people who have had the AIDS infection established through blood tests. The Data Inspectorate began this study at the request of the Health Committee for Homosexuals, and the report is expected to be finished next week, Department Head Tor Hafli reports to AFTENPOSTEN.

Both Ullevål Hospital and the Oslo Board of Health received rights from the Data Inspectorate to register information on the AIDS infection, but the registration takes place in dissimilar ways. At the Oslo Board of Health the name of the person who takes the test is registered only in the handwritten journal which is filled out by the physician. When the test result is stored in the computer, the name of the person tested is eliminated. The Oslo Board of Health also does not mark the blood samples with names when they are sent to the laboratory for analysis. Instead a code is used for identification of the sample.

On the other hand, Ullevål Hospital data encodes also the name of the person infected with AIDS. Accordingly, it is possible to search for names in the hospital's data system and to check whether individuals have been tested for AIDS and have tested positive. However, the information is not stored in such a manner that it is possible to output a list of everyone who has been registered as infected with AIDS.

"In light of the motion by Ullevål Physician Magne K. Fagerhol regarding a central register for everyone infected with AIDS, the confidence of homosexuals in this hospital has been weakened. We know that many do not want to have themselves tested for AIDS out of fear that such sensitive information will go astray. For this reason we have urged everyone who wants to be tested to do it anonymously at the Oslo Board of Health until we receive assurances that personal information will not be misused at Ullevål," says Per Skjervagen of the Health Committee for Homosexuals. Besides, the health committee is awaiting the Data Inspectorate's report before they make any new motions regarding the manner in which the registration is taking place.

The Data Inspectorate is studying whether the terms of the rights given to Ullevål and the Oslo Board of Health are being complied with. Department Head Hafli reports that they also want to look at the whole registration system, and that this can end in new conditions or recommendations.

Oslo Disappointed with Funding

Oslo AFTENPOSTEN in Norwegian 13 Aug 86 p 16

[Article by Hilde Harbo: "City Councillor Ole B. Hovind: 'Disappointingly Little for AIDS Measures in Oslo'"]

[Text] The Health Directorate has appropriated 3.8 million kroner for AIDS measures among narcotics addicts in Oslo. "Disappointingly little," says City Councillor Ole B. Hovind, and he refers to the fact that the municipality asked for 6.65 million for the present year and 16 million for 1987.

It is among needle-using narcotics addicts that the AIDS infection is now spreading most rapidly, and the City of Oslo wants to prevent further spreading by, among other things, doubling the capacity of treatment facilities for this group. The city needs considerable State support in order to carry out its plans. The sums which have been appropriated in order to increase the capacity of treatment institutions are far from large enough to step up offerings as planned. Out of the money which has been appropriated, the Health Directorate has earmarked 600,000 kroner for four new posts for one year for the Veksthuset treatment institution. The Psychiatric Clinic at Vinderen received 400,000 kroner for a pilot project with a custodial-care group. Veslelien Sanitarium is receiving a grant of one million kroner for six posts for one year. The Health Directorate is stipulating that the posts be occupied by personnel who have professional treatment competence and training.

A new treatment home, led by the so-called Hov Group, is getting one million kroner in operating funds provided that the institution is located in Oslo. City Councillor Hovind reports that they have been hunting for a suitable site in Oslo without finding any.

"The Health Directorate's stipulation has had the effect that the opening of this institution has been delayed," he says.

Hovind is also somewhat in despair over the fact that the Health Directorate is asking for new and expanded plans for an acute care institution for narcotics addicts before the money is paid out for this.

"With such a stipulation the best will become the enemy of the good," Hovind says. "We should get money to establish an acute care institution at a temporary site in order to get started."

The AIDS epidemic is at the point of becoming a major economic burden for the City of Oslo. This year treatment and various measures will cost the city between 50 million and 60 million kroner. If the disease's further spread follows the forecasts, the cost will be between 150 million and 200 million kroner in 1988.

PAPUA NEW GUINEA

MALARIA REPORTED ON RISE IN NORTH SOLOMONS

Port Moresby PAPUA NEW GUINEA POST COURIER in English 28 Aug 86 p 1

[Article by Wesley Bunpalau]¹

[Text]

MALARIA, the killer disease, is on the rise again in the North Solomons Province.

And the assistant secretary for health in the province, Dr Joseph Pulau, yesterday held the national Government responsible for recent deaths from the disease.

Four deaths, three at the Sohano health centre on Buka Island and one in Buin, had been accounted for in recent weeks.

The figure could be more if deaths in remote areas were also accounted for, said the doctor.

The deaths were from cerebral malaria, the most severe form of the disease.

Dr Pulau said another 160 malaria cases of various stages had been treated at the Arawa General Hospital where there could also have been some deaths. Figures were yet to be finalised.

Tests carried out in various villages showed an alarming increase in malaria parasites in both adults and children. Adults were the worst affected because they were not responding well to treatment.

Fall victim

Dr Pulau accused the national Government of stopping fund allocation for the "much needed" spraying program in rural areas.

The Government had abolished spraying programs throughout the country since January as part of its cost-saving exercise.

The health division in the province was planning an alternative, he said, but while this was being planned, and subject to Government approval, more people would fall victim of the disease.

He was concerned because figures, which he could not release, showed a general increase in malaria for the seven months to August.

The division was now embarking on a major awareness campaign aimed at educating rural villagers on how to prevent the spread of malaria.

A public forum had also been organised in the Buka district during which leaders both in the Government and the community would argue out the question of whose responsibility it was to control malaria.

But Dr Pulau said the division wanted to ensure the rural people understood that the responsibility was both the people's and Government's.

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CSO: 5400/4416

PAPUA NEW GUINEA

BRIEFS

TYPHOID CASES INCREASE--Health workers in Enga Province have been ordered to give top priority to people suffering from typhoid. The number of sufferers has increased drastically--there were now 250 confirmed cases, 50 up on two weeks ago. The provincial minister for health, Mr Londati Tengen, gave the order in Wabag on Friday when closing a week-long in-service course for senior health workers. He said the sickness was spreading fast throughout the province and steps must be taken immediately to bring it under control. Fifty people have died since the disease was first reported in November last year. Eradication of the disease was in the hands of health workers and if they failed to do their job, more lives were likely to be lost, Mr Tengen said.
[Text] [Port Moresby PAPUA NEW GUINEA POST COURIER in English 26 Aug 86 p 3]
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CSO: 5400/4416

PEOPLE'S REPUBLIC OF CHINA

RELATIONSHIP BETWEEN AIR POLLUTION AND CHILDREN'S PREVALENCE OF CARRYING
STRYPTOCOCCUS HEMOLYTICUS α, β ON NASAL MUCOSA

Beijing ZHONGHUA YUFANG YIXUE ZAZHI [CHINESE JOURNAL OF PREVENTIVE MEDICINE]
in Chinese Vol 20, No 3, 25 May 86 pp 157-159

[English abstract of article by Environmental Health Monitoring Department of
the Nanning Anti-Epidemic Station, Nanning]

[Text] In the summer and winter of 1982-1983 we observed continuously variations of air pollution and prevalence of carrying stryptococcus hemolyticus α, β in children's nasal mucosa, in the south industrial polluted area of Nanning City. Two schools, located on the leeward side, 2 km away from the industrial polluted sources, were selected as observation points. Another one, located on the windward side, 2.5 km from the industrial polluted sources, was selected as the control point. The children were 8-11 years of age. The results of the air monitoring and physical examination in two years showed that the concentrations of SO_2 , NO_2 and suspended particulate matters at the observed points were higher than at the control point. The rate of carrying stryptococcus hemolyticus on the nasal mucosa among children at the observed points were also higher than that at the control point. These changes are consistent with the variations of lysozyme activity in saliva and the incidence of the upper respiratory tract infections. It indicates that the resistance of the body and the function of the local defence were reduced in children who lived in the polluted areas. We suggest that the prevalence of carrying stryptococcus hemolyticus α, β in children's nasal mucosa could be considered as one of the indicators for the evaluation of air pollution. (Paper received 14 Feb 84, finalized 3 Nov 84.)

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CSO: 5400/4128

PEOPLE'S REPUBLIC OF CHINA

ACUTE INFECTIONS POLYRADICULONEURITIS CHARACTERISTICS IN CHILDREN

Beijing ZHONGHUA SHENJING-JINGSHENKE ZAZHI [CHINESE JOURNAL OF NEUROLOGY AND PSYCHIATRY] in Chinese Vol 19, No 3, 23 Jun 86 pp 149-151

[English abstract of article by Xie Xuerong [6043 1331 1313], et al., of Qingdao Medical Academy, Neurology Dept.]

[Summary] 343 cases of acute infective polyradiculoneuritis in children were analyzed in comparison with the corresponding clinical informations in 189 cases of adult in patients with the same disease in the same period. The clinical characteristics in the children could be summarized as follows: 1) The most common prodromal symptoms were those of the upper respiratory tract infection and diarrhea; 2) Weakness of the extremities was the symptom most commonly seen whereas pain and numbness of the limbs were less common; 3) Paralysis of the glossopharyngeal and vagus nerves occurred rather frequently; 4) Sensory disturbance of the peripheral type was rare; and 5) Some cranial spinal nerves were often both involved at the same time; however, multiple cranial nerve involvement was rare; 6) Recurrence was uncommon; 7) Pneumonia was common as a complication; and 8) The long-term prognosis was good. (Paper received 26 Dec 83, finalized 24 Mar 84.)

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PEOPLE'S REPUBLIC OF CHINA

SEROEPIDEMIOLOGICAL STUDY OF VIRAL HEPATITIS AMONG HOSPITAL STAFFS

Beijing ZHONGHUA LIUXINGBINGXUE ZAZHI [CHINESE JOURNAL OF EPIDEMIOLOGY] in Chinese Vol 6, No 6, 10 Dec 85 pp 321-325

[English abstract of article by Ma Jing [7456 7234], et al.]

[Summary] The results of a seroepidemiological study of viral hepatitis types A and B among 613 hospital personnel who worked in a large army general hospital in Beijing are reported and compared with those of 292 peasants, 17 and more years of age who lived at the Qiao Huiying Production Brigade in Beijing suburb as a control group in 1982. The prevalence rate of HAV infection (87.93 percent) among the hospital personnel was significantly lower than that (99.66 percent) of the control. On the contrary, the prevalence rate of HBV infection (63.62 percent) among the former was significantly higher than that (49.32 percent) among the latter. The HBV infection rate was highest among the workers in the department of gastroenterology (80.39 percent) and lowest in the paramedical workers aged 17-19 years (44.23 percent). The frequency of HBV infection increased in those who had frequently contact with potentially infectious blood or HBsAg positive patients and who had previous history of hepatitis. It also increased with the duration of working in their present occupation and with their age. It was, however, not related to their family contact with patients of liver diseases etc. These results support the hypothesis that the occupational hazard of the health workers does not come from HAV infection but from HBV infection.

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PEOPLE'S REPUBLIC OF CHINA

ANALYSIS OF GENETIC EPIDEMIOLOGY OF HEPATITIS B INFECTION IN TWINS

Beijing ZHONGHUA YUFANG YIXUE ZAZHI [CHINESE JOURNAL OF PREVENTIVE MEDICINE] in Chinese Vol 20, No 1, 25 Jan 86 pp 9-11

[English abstract of article by Hu Shanlian [5170 0810 5114], et al., of Department of Epidemiology, Shanghai Medical University, Shanghai, etc.]

[Summary] To understand the hereditary effect on the infection of hepatitis B, a genetic epidemiological study was carried out on 182 twins in Shanghai in 1983. The average age of children was 10.2 years. 5 hepatitis B virus markers (HBsAg, HBeAg, anti-HBe, anti-HBs, anti-HBc) were detected by ELISA methods. The concordance rate of HBsAg within monozygotic twins (102 pairs) and dizygotic twins (80 pairs) was 92.2 percent and 91.3 percent, respectively, the heritability was 10.3 percent. On the other hand, the concordance rate of HBV markers between MZ and DZ twins was 84.7 percent and 76 percent, respectively, the heritability was 36.3 percent. In addition, the concordant pairs ratio had no significant difference between the two groups either. It demonstrated that genetic effects as expressed by the HBsAg carriage and prevalence rate of HBV in the MZ twins should be higher than those in the DZ twins were not seen. Therefore, it suggested that environmental factors had played an important role in the infection of hepatitis B. Hence the use of HB vaccine can change the acquired environmental factors so as to interrupt the perinatal infection of hepatitis B between mother and child. (Paper received 23 Apr 85, finalized 2 Sep 85.)

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PEOPLE'S REPUBLIC OF CHINA

STUDY ON HEMOSTASIS, BLOOD COAGULATION IN ACUTE VIRAL HEPATITIS

Beijing ZHONGHUA NEIKE ZAZHI [CHINESE JOURNAL OF INTERNAL MEDICINE] in Chinese
Vol 25, No 5, 20 May 86 pp 294-297, 319

[English abstract of article by Wang Hongli [3769 7703 0448], et al., of Rui Jin Hospital, Shanghai Second Medical University]

[Summary] The authors reported the results of a study on the change of hemostasis and blood coagulation of 10 patients with acute severe viral hepatitis admitted. 22 parameters were determined and 20 normal adults served as controls. Prothrombin Time. Kaolin Partial Thromboplastin Time and Russell Viper Venom Time were all prolonged. Fibrinogen. Factors II. V. VII and IX were decreased. Factor VIII was normal or elevated and Factor VIII-related antigen was significantly increased. The ratio of F VIII:Ag/VII:C was >1 . Thrombin Time was prolonged and Euglobulin Lysis Time shortened and FDP was increased. Platelet count was decreased. Fibronectin was decreased but β -Thromboglobulin remained normal. In 5 mortal cases all of the parameters got worse with the exception of F VIII:C, F VIII:Ag and F VIII:Ag/VIII:C. The plasma protamine paracoagulation tests were negative. In 5 cured cases all of the parameters were shortened or elevated. The 3 P tests were also negative. (Paper received 12 Apr 85, finalized 3 Feb 86.)

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(1985 年 4 月 12 日收稿 1986 年 2 月 3 日修回)

PEOPLE'S REPUBLIC OF CHINA

EFFECTIVENESS OF MENINGITIS EPIDEMIC VACCINE OBSERVED

Beijing ZHONGHUA LIUXINGBINGXUE ZAZHI [CHINESE JOURNAL OF EPIDEMIOLOGY] in Chinese Vol 6, No 6, 10 Dec 85 pp 344-346

[English abstract of article by Xu Caihua [6079 2088 5478], et al.]

[Summary] The authors have observed the effectiveness of an urgent mass vaccination with purified meningococcal polysaccharide vaccine among 108,402 infants and children aged between 6 months and 15 year-old in Yunyang county, Sichuan, during 1981 to 1984. Slight and middle grade reaction after 24 hours of the vaccination were found among 98 percent of the recipients, and serious reaction was only 1 percent. None of them had abnormal reaction.

Among 108,402 infants and children, 57,808 were in the vaccination group and 46,994 in the control group. The prevalence in the urgent vaccination group was decreased rapidly and markedly. The protection rate after one-week, and 80 percent after vaccination during the subsequent three years. Among the 103 serological tested children, the geometric mean titer (GMT) after one-week of the vaccination was increased to 4.77-fold, 6.23-fold after two-week of the vaccination as compared with the GMT before vaccination. The children with 4-fold antibody titer increase was calculated as 57.28 percent of the vaccinated and control groups showed statistical significance, corresponding with the epidemiological results.

We conclude that the urgent mass vaccination with this vaccine was successful with safety, gave rise to increase of antibody titers and created preventive effects. The prevalence of the disease was controlled within two weeks. The immune protective effect among vaccinated population may persist for three years.

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PEOPLE'S REPUBLIC OF CHINA

DETECTION OF THE ETIOLOGIC AGENT OF EPIDEMIC HEMORRHAGIC FEVER (EHF) IN THE
SPLEEN OF APODEMUS AGRARIUS

Shanghai SHANGHAI YIKE DAXUE XUEBAO [ACTA ACADEMIAE MEDICINAE SHANGHAI] in
Chinese Vol 13, No 4, Jul 86 pp 245-248

[English abstract of article by Zhu Zhiyong [2612 2535 0516], et al., of
Zhejiang Health and Anti-Epidemic Center, Hangzhou, and Tang Yiwei [3282 0001
7279] and Xu Zhiyi [1776 1807 0001] of Department of Epidemiology, School of
Public Health, Shanghai Medical University, Shanghai]

[Summary] Using the indirect immunofluorescent antibody test, EHF antigen was
detected in spleens of Apodemus agrarius trapped from the EHF endemic area or
those inoculated with EHF virus, and also in blood specimens of EHF patients in
China and Korea. Time intervals for emergence of antigen in the spleen is the
same as for lungs. The intensity of immunofluorescent reactions on spleen sec-
tions are usually weaker than that on lung sections. Positive spleen suspen-
sions could be passaged in Apodemus agrarius. These results show that detection
of the EHF etiologic agent in the spleen of Apodemus agrarius is a common
phenomenon.

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PEOPLE'S REPUBLIC OF CHINA

STUDY ON PATHOGENESIS OF HEMORRHAGE IN EPIDEMIC HEMORRHAGIC FEVER

Shanghai SHANGHAI YIKE DAXUE XUEBAO [ACTA ACADEMIAE MEDICINAE SHANGHAI] in Chinese Vol 13, No 4, Jul 86 pp 278-281

[English abstract of article by Yang Peizhen [2799 0160 3791], et al., of Department of Infectious Diseases, Hua Shan Hospital, Shanghai Medical University, Shanghai, and Chen Boquan [7115 0130 2938] and Zhou Guofang [0719 0948 5364] of Institute of Virology, Chinese Academy of Sciences, Shanghai]

[Summary] In an attempt to clarify the pathogenesis of hemorrhage in epidemic hemorrhagic fever (EHF), platelet and rbc smears obtained from 31 cases in various stages of this disease were stained with fluorescein labelled anti-human IgG and C₃, and then stained for fluorescein labelled specific monoclonal antibody in the positive cases. The results indicated that the immune complex was present on the surface of platelets and rbc early in the febrile stage, with a detection rate of 33.3 percent and 25.8 percent respectively. It was still present in the shock-oliguric stage, but disappeared in the polyuric and convalescent stages. The platelet count and its aggregation rate was reduced significantly during the febrile stage. Plasma fibrinogen, determined semi-quantitatively, in various stages of EHF were normal. But fibrin degradation product (FDP) levels were elevated in the febrile stage. The increase was particularly marked in the shock-oliguric stage, remained abnormal in the polyuric stage, and gradually returned to normal in the convalescent stage. The aforementioned results suggest that immune complex deposition on the surface of tissue cells may be the main factor which leads to hemorrhage.

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PEOPLE'S REPUBLIC OF CHINA

LONG-ACTING RIFAMPIN MEMBRANE PREPARATION FOR TRACHOMA TREATMENT

Beijing ZHONGHUA YANKE ZAZHI [CHINESE JOURNAL OF OPHTHALMOLOGY] in Chinese
Vol 22, No 2, 12 Mar 86 pp 102-103

[Summary] The preparation of a long-acting rifampin membrane for the treatment of trachoma was described. It consisted of rifampin in a polyvinyl alcohol core-film and a coating of poly- β -hydroxyethylmethacrylate to control the speed of drug release. When placed in the lower fornix of the conjunctival sac, it provided continuous release of rifampin for 2 days.

The therapeutic effects of rifampin membranes and 0.5 percent rifampin eyedrops on trachoma were compared in 767 patients with the conclusion that the membrane form produced better results while it was also economical and convenient.

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PEOPLE'S REPUBLIC OF CHINA

THE EPIDEMIOLOGICAL INVESTIGATION OF PNEUMOCONIOSIS IN 13 PROFESSIONS IN SICHUAN PROVINCE

Beijing ZHONGHUA YUFANG YIXUE ZAZHI [CHINESE JOURNAL OF PREVENTIVE MEDICINE]
in Chinese Vol 20, No 3, 25 May 86 pp 134-139

[English abstract of article by Wu Deliang [0702 1795 5328], et al., of The Cooperative Research Group of Health Examination of Workers in Dust Industry in Sichuan Province]

[Text] The result of epidemiological investigation of 13 professions, 61 factories and mines in Sichuan province is reported, 2,988 cases of pneumoconiosis were detected in 29,403 dust-contact workers. The morbidity rate was 10.16 percent and the mortality rate was 24.60 percent. As the years progressed. The concentration of dust decreased and working condition improved, the morbidity and fatality rates of pneumoconiosis decreased significantly. The characteristics of professional distribution of pneumoconiosis were as follows. The dust damage and condition of pneumoconiosis of various mining professions and fire-resistant refractory material were severest. The condition of pneumoconiosis of small factories and mines was severer than that of big and mediumsized factories and mines of the same professions. The condition of pneumoconiosis of underground workers was severer than that of glass and casting professions on the surface.

Based on the result of investigation, the key points of the prevention and treatment of pneumoconiosis in the whole province were discussed. (Paper received 7 May 85, finalized 6 Feb 86.)

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PEOPLE'S REPUBLIC OF CHINA

STUDY ON ETIOLOGY, EPIDEMIOLOGY OF 1446 PATIENTS WITH DIARRHEA

Beijing ZHONGHUA YUFANG YIXUE ZAZHI [CHINESE JOURNAL OF PREVENTIVE MEDICINE] in Chinese Vol 20, No 1, 25 Jan 86 pp 15-17

[English abstract of article by Ye Zhixiong [0673 1807 7160], et al., of Department of Epidemiology Tongji Medical University, Wuhan]

[Summary] 1446 out-patients with acute diarrhea were examined and interviewed from Oct. 1983 to Sept. 1984. Among them 584 patients', (40.4 percent) fecal samples, were found positive for pathogens. The detection rates were 15.8 percent for Rotavirus, 12.7 percent for Shigella spp. 5.0 percent for Enterotoxigenic Escherichia coli, 3.9 percent for Campylobacter jejuni, the rest were infected by other enteropathogens, 84 patients (5.8 percent) were found to have 2 or more pathogens, mainly Shigella spp, Rotavirus or Enterotoxigenic E. coli, in their fecal specimens.

The detection rate was highest in July-Sept. The disease occurred in all ages, but more common in pre-school children and adolescents. The detection rates in mixed feeding infant and peasants were 60.4 percent and 50.0 percent, respectively.

There were no statistically significant difference of infection rates between the two sexes and between infants in nursery and those at home. (Paper received 21 Jan 85, finalized 11 Nov 85.)

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PERU

BRIEFS

JUNIN YELLOW FEVER OUTBREAK--Control was established, after 14 cases of yellow fever were reported recently in the district of La Merced in Junin, by means of a mass vaccination campaign designed to prevent an epidemic of this disease. The Ministry of Health has revealed that a constant epidemiological effort is being pursued with the application of insecticides in the endemic zones of the country. These zones are located in the departments of San Martin, Loreto, and Madre de Dios, in the central part of Junin and on the country's frontiers. Any person who travels to the forest region must be vaccinated against the yellow fever because of the risk of contracting the disease. Apparently, the recent outbreaks in the department of Junin caused a certain concern in some other South American nations, such as Mexico, which is now requiring travelers applying for visas for that country to present a certificate of vaccination against yellow fever. [Text] [Lima EL COMERCIO in Spanish 29 Jun 86 p A-12] 5157

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CSO: 5400/2074

POLAND

MEDICAL RESEARCHER UPDATES DOMESTIC AIDS SITUATION

Warsaw POLITYKA in Polish No 34, 23 Aug 86 p 10

[Interview with Aleksander Skotnicki, M.D., adjunct at the Krakow Medical Academy Clinic of Hematology, by Sylwester Marynowicz; date, place not given]

[Excerpts] [Question] You have been in the United States on a Fulbright Scholarship. You selected the University of Washington as a place to continue your research on leukemia, and it was not long until you became one of the few Polish physicians to engage in research on the new disease AIDS....

[Answer] Appearances to the contrary, both diseases are not all that different from each other. They both have the common features of serious immune system disorders and their resulting infectious outcomes. Under enormous pressure from the general public and political factors, practitioners in virtually every medical and biological discipline have launched a fight against this disease, a fight which still has not been won. After arriving in the United States, I was inevitably caught up in the heat of this battle.

[Question] What kinds of research work did you pursue?

[Answer] Working together with a team headed by Professor Allan L. Goldstein, we made a study of the feasibility of augmenting the diminished immune response of lymphocytes collected from persons in the high-risk groups. We investigated many so-called immunomodulators, including a Polish-made drug that is designed to boost damaged cellular resistance--the thymus gland extract TFX--and produced by the "Polfa" firm in Jelenia Gora. When we started doing research on TFX 10 years ago under the direction of Professor Aleksandrowicz, AIDS was totally unknown, but now it may be that we have in our hands an effective agent that may make it possible to block or delay the progressive degradation of the immune systems of persons threatened by AIDS.

[Question] What do you think about the AIDS situation in Poland?

[Answer] So far, tests have been run on blood samples from over 6,000 people in the so-called high risk groups and outside these groups, that is, blood donors, prostitutes, and others. The presence of AIDS virus antibodies, which proves

contact with the virus and the formation of antibodies against it, has been detected in only seven cases. But none of the symptoms characteristic of the AIDS disease have been found in these cases, and so they do not meet the criteria for identifying the presence of this syndrome. So, there is only a slight possibility that any of the Polish subjects which were found to be so-called seropositive as a result of these tests will ever come down with the AIDS disease itself.

[Question] Thank you for the interview.

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SENEGAL

BRIEFS

MALARIA STATISTICS--There has been a noteworthy decline in malaria in the Kaolack region, according to an evaluation of the medical region published in April. Since 1983, in fact, the team working in the Kaolack medical region has been gathering statistics for the report and thanks to such data, it is possible to follow the trend of the disease in each department. It is the Nioro du Rip area that turns out to be the most sensitive. Out of 8,687 children examined, 4,214 were suffering from malaria. Of these, 362 were the victims of a pernicious attack. However, these alarming results are a source of satisfaction for members of the regional medical team, inasmuch as they reveal a drop of over half compared with 1984. Thanks to drug therapy using chloroquine, the fight waged against malaria for several years is beginning to show results. [By P. F.] [Excerpts] [Dakar LE SOLEIL in French 21 Jul 86 p 9] 11,464

CSO: 5400/174

UNITED KINGDOM

FINANCIAL STATUS BACKDROP TO WIDENING 'HEALTH GAP'

London DAILY TELEGRAPH in English 2 Aug 86 p 5

[Article by Sarah Thompson]

[Text]

THE 'HEALTH GAP' between the middle and working classes is widening, health researches claim. They believe unemployment may be one reason why the working class fares worse. A study in this week's "Lancet" says that working class men are more likely to die early from heart disease, lung cancer and strokes than those in the middleclass.

It says that early deaths have fallen more significantly among non-manual workers than among manual workers.

Professor Michael Harmot, of University College, London, and Dr Michael McDowall, a medical statistician formerly with the Office of Population Censuses and Surveys, conclude that unemployment could be an important factor in the social health gap.

The researchers argue that the gap is real and cannot be explained away by reference to changes in classification of social class, misclassification of the unemployed or increased numbers of immigrants entering the manual classes.

Regional gap

While deaths from lung cancer in women and from heart disease in men fell between 1970 and the early 1980s among non-manual workers, they increased among manual workers.

At the same time, the proportion of smokers fell more among middle class groups than among the working class, with working class women showing the smallest decline.

The researchers suggest that unemployment, which is more

prevalent among manual workers, and which carries a relatively high death rate, could be "an important factor".

They add that "a widening gap in income between classes might play some part in the widening gap in mortality rates", but do not go further to find a cause-and-effect relationship.

Regional gaps are also opening up. Death from heart disease is higher in Scotland, Wales, and the north of England than the south.

Wales, however, was the only region which showed an important drop in deaths from heart disease among working class men. Elsewhere deaths declined among non-manual workers but not among the manual groups.

The researchers add: "Other aspects of lifestyle should be explored. Smoking differentials by class have, if anything, widened. They may have a role in widening differentials in diseases other than lung cancer.

Consider diet

"Diet, alcohol, and environmental occupational exposures, including psychosocial ones, should be considered."

Another study in the Lancet this week shows that a third of patients admitted to a North London hospital are of Southern Irish or Scottish extraction although they only form 10 per cent of the population.

The Polish community was also found to be over-represented among alcohol-related admissions. Of all the patients concerned more than half were aged between 14 and 40.

UNITED KINGDOM

MENINGITIS OUTBREAK SPREADING; GOVERNMENT SEEKS CURE

Discovery of Carrier

Leeds YORKSHIRE POST in English 30 Jul 86 p 3

[Text]

TESTS on 350 school pupils after the death of a seven-year-old boy from meningitis have found a carrier of the disease, health chiefs said yesterday.

Christopher Knight, of Stonehouse, Glos., died last Thursday and two other children from the village were also admitted to hospital with the brain infection.

Gloucester community medicine registrar, Dr. James Stewart, said a carrier had been found "who was relatively close to one of last week's three casualties."

He said the carrier and his immediate family had been treated with antibiotics and no further tests were necessary. No

other carrier of the potential killer bacteria had been found during the testing, he said.

Meningitis has been running at 14 times the national average in the Stroud area of Gloucestershire in the last five years and has claimed more than 100 victims, three of them fatal.

Meanwhile the hunt was continuing across Europe yesterday for a family from Stonehouse whose two children could be at risk.

Christopher and Angela Capener, aged seven and four, are on holiday in France and Germany with their parents and Interpol has been alerted to try to track them down so they can be tested for the bacteria.

'Epidemic' Proportions

London SUNDAY TELEGRAPH in English 3 Aug 86 p 8

[Article by Carole Dawson]

[Text] Meningitis, the mysterious and often deadly brain disease which has confounded the medical profession for more than 70 years, is rapidly reaching epidemic proportions.

In the first six months of this year there were 72 deaths and 938 cases reported throughout the country--a 50 per cent increase on 1985 figures. And, it is now officially admitted, only about half the true number of cases may have been notified by doctors through laziness in dealing with the paperwork involved.

The symptoms are sudden high fever, severe headache (similar to a migraine) and stiffness of the neck and back. Early diagnosis is of vital importance in saving lives; the treatment is immediate admission to hospital and swift administration of antibiotic drugs.

All attention has recently been focused on the peaceful and affluent Cotswold district of Stroud, Gloucestershire, now entering its sixth year of a serious, stubborn epidemic which has affected almost 100 people and caused the deaths of three children.

Last week local villagers, normally slow to ire, marched on Downing Street demanding Government action. They presented a petition of more than 2,500 signatures collected in the five days since the latest fatality, seven-year-old Christopher Knight, who was buried on Thursday.

Swimmers boycotted

And next week Junior Health Minister Baroness Trumpington and the Department of Health's chief medical officer, Professor Donald Acheson, will address a public meeting there.

But Government ministers are said to be deeply concerned about the national picture as well. Plymouth, Bristol, North Devon, Leeds, parts of Norfolk, a belt from Manchester to Merseyside and areas of London, are all affected.

In Stroud residents have been urged not to panic, but restraint is hard in the face of mounting hysteria from the outside world.

Estate agents report clients have threatened to pull out of house deals, employees are having second thoughts about accepting jobs in the area and even the local swimming team has been boycotted following an—unfounded—rumour that the town pool was responsible for spreading the disease.

Health officials have been inundated with enquiries, as has the Meningitis Support Group—a vigorous local body which has already raised £20,000 for research—which received 73 telephone calls in one evening alone last week.

Everyone has a pet theory about the cause of the epidemic and many are eager to offer unsolicited advice and opinions to the authorities.

Rats, cats (but not dogs in this fiercely canine area), pigeons, Antipodean pigs (this from an Australian woman), the smell of sour milk from the Milk Marketing Board's pre-

mises, and bacon waste from a local factory have all been cited.

Xenophobia has crept in: one correspondent simply blamed "foreigners" and another railed against nasty French and German cheeses masquerading as "health foods." An unsigned letter to the support group last week was in no doubt at all about the reason for the outbreak: "working mothers."

There is a strong suspicion among some that proximity to three nuclear power stations (Berkeley, eight miles; Oldbury, 12 miles and Hinckley, 35 miles) holds the clue, while this view is "preposterous" to others (notably the Central Electricity Generating Board).

One local wag felt it more likely to be due to the fact that the town is bang in the middle of a Royal triangle (Princess Anne, two miles; Princess Michael of Kent, four miles and the Prince and Princess of Wales, eight miles).

While meningitis can only be spread by personal contact (like the common cold), senior environmental officer Mr Kelvin May said last week that "an environmental factor can't be ruled out" as acting like a trigger to some people who develop the disease, while others remain immune.

A local survey is now looking at housing conditions, heating and ventilation systems, population density and social activities such as sport and going to discos. The results are not yet known but Dr James Stuart, registrar in community medicine for Gloucester Health Authority, who is compiling them, has been guided in his enquiries by findings from

Norway, where meningitis is now endemic.

He said last week: "Research there has shown an association with passive smoking—young children breathing in their parents' cigarette smoke—and with physical and mental stress, also with heavy physical exercise."

In the past meningitis was associated with overcrowding. It was even dubbed the "concentration camp disease." During World War I, 2,000 men reportedly died from it in France and there was a large epidemic during World War II.

Community devastated

But despite its traditional image meningitis today seems to be hitting particularly hard in relatively rich, and rural, areas. At the beginning of the year a public schoolboy, grandson of a prominent industrialist, died. Poverty has been ruled out as a factor in the spread of this illness, which crosses all social barriers.

Mr Steve Tomlin, chairman of the Meningitis Support Group, at Stroud, said last week it has "devastated this community." But Mr May feels it is important for people to keep calm. "We don't want to draw a black line round this area."

Ironically, Stroud may partly be suffering from its own zeal and experience. It is likely to end 1986 with figures which show it has 20 times the national average for meningitis cases. Local doctors are so aware of the problem that at the slightest hint of the disease a patient is admitted to hospital.

Notification level is "99.9 per cent," unlike the national figure of 50 per cent.

When the rest of the country catches up in realising the importance of notification the figures could be a little heartening for those in Stroud but much more alarming in other areas.

Government Action

Edinburgh THE SCOTSMAN in English 8 Aug 86 p 2

[Text]

The Government has no magic wand to cure the meningitis epidemic in the Stroud area of Gloucestershire, the Junior Health Minister, Baroness Trumpington, told a meeting of local people yesterday.

She said that research to find a vaccine was pressing ahead but in the short term the problem was intractable.

The Government was doing all that could be done, she said, and would respond with more public health facilities if necessary.

Baroness Trumpington, accompanied by Sir Donald Acheson, the Government's chief medical officer, addressed more than 250 people at Stonehouse, near Stroud.

Although meningitis cases

are rising nationally — claiming 72 lives so far this year — the figures for the Stroud area are 14 times the national average.

In the past five years there have been more than 100 cases, 53 of them the more severe bacterial type, meningococcal meningitis, and three children have died.

The meeting was told that a four-month-old girl had been taken to Gloucester Hospital with confirmed meningitis. She was in a stable condition and tests were being carried out on her parents.

Baroness Trumpington said: "I recognise the stress and anxiety that the outbreak continues to cause. But I have got no magic wand to wave and no

wonder cure to offer. I only wish I had."

Mrs Jane Wells, spokeswoman for the Stroud Support Group, said that the local incidence of the disease was unusual. Most outbreaks last just over two years but the Stroud epidemic has continued for more than double that. In addition teenagers are affected, which is also against the national trend.

Mrs Irene Hopwood, a founder member of Stroud Support Group, suggested that the meeting should not be satisfied with the baroness's "platitudes."

But the baroness replied: "I have not come here to flatter anyone and to say, 'Don't worry.' I am very concerned."

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CSO: 5440/122

UNITED KINGDOM

NUMBER SUFFERING FROM AIDS SHOWS 'STEEP RISE'

London DAILY TELEGRAPH in English 9 Aug 86 p 5

[Article by Sarah Thompson]

[Text]

THERE HAS BEEN a steep rise in the number of people suffering from Aids, Acquired Immune Deficiency Syndrome. In July, 76 new cases were reported, according to figures from the Government's disease surveillance laboratories.

This compares with an average of between 20 to 30 new cases in previous months, and brings the total in Britain to 465 since surveillance began in 1982.

A total of 234 people have died of the disease.

The British Medical Journal stated this week that the equivalent of a jumbo jet load of people could die of Aids every month unless the Government steps up action to halt its spread.

In an editorial, the journal condemned the Government's Aids publicity campaign as "unimaginative and of little impact."

It backed a call from Lord Young of Dartington and the College of Health for £61 million to be spent in the next financial year on fighting the disease.

The Terrence Higgins Trust,

a charity and support group for victims, said that the figures represented an "inexorable upward trend in the course of the outbreak of Aids."

The epidemic will continue to develop at these alarming rates unless urgent steps are taken, it added.

The Department of Health said that the sharp rise in reported cases was "almost entirely due to a time lag in reporting."

Dr Charles Farthing, an Aids specialist, said on BBC television news last night that Aids was now extremely common among homosexuals in London, and 10 per cent of homosexuals carried the disease country-wide. But every sexually active person was at risk.

"I feel that by the end of the century there won't be one family in the United Kingdom that isn't touched in some way by this disease."

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CSO: 5440/122

UNITED KINGDOM

NEWLY DISCOVERED PARASITE CAUSING GASTROENTERITIS

Leeds YORKSHIRE POST in English 1 Aug 86 p 8

[Text]

A KILLER bug, cryptosporidium, a newly-recognised parasite which can cause gastro-enteritis in people and animals, has been detected in Yorkshire.

Outbreaks in the county have been reported in Hull and Sheffield, members of Yorkshire Water Authority's Water Quality Advisory Group were told yesterday.

The parasite has not been found in water supplies.

Members were told of 16 cases in Hull but it was thought household pets were the source. The 28 cases in Sheffield were still under investigation.

Similar outbreaks occurred in Great Yarmouth, Wales and Surrey.

The report added: "Parasites such as cryptosporidium are remarkable in that they are resistant to a wide range of antiseptics and disinfectants — including chlorine."

The group was told that farm pollution was on the increase in Yorkshire.

Five years ago about 100 pollution incidents due to farming were

reported in the county — a figure which last year rose to 328, members learned.

The main source is liquid from silage, preserved fodder, said to be sometimes 200 times stronger than crude domestic sewage and capable of penetrating concrete.

The authority's regional pollution prevention officer, Mr. John Rhoades, said spillage or incorrect disposal of agricultural chemicals could also affect fisheries.

Members agreed to urge farmers to seek advice from Yorkshire Water and the Agriculture Ministry and to report incidents.

Yorkshire Water is funding a research team from Leeds University to investigate the causes of last winter's exceptional rise in raw water colour in some parts of the county.

Thousands of consumers in Leeds and Calderdale, supplied by water from Pennine reservoirs, experienced an unprecedented rise in discolouration of supplies last winter.

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CSO: 5440/122

UNITED KINGDOM

CAT FLEAS SAID TO POSE TYPHUS, OTHER HEALTH THREATS

London DAILY TELEGRAPH in English 4 Aug 86 p 26

[Article by Alison Beckett]

[Text]

THE cat flea, long thought of as just an irritating nuisance, is a potential killer of both humans and animals, research has disclosed.

Its ability to carry and transmit disease has been severely underestimated. It can pass the rodent diseases bubonic plague and murine typhus from infected animals to humans.

Britain's leading authority on fleas, Dr Bernice Williams of the Medical Entomology Centre at Cambridge University, says the flea may also have a role in passing on feline leukaemia virus, the cat equivalent of Aids.

Estimates put the number of cat fleas in Britain today at around 10 billion, of which 100 million are hungry adults, the population is believed to be growing.

Writing in New Scientist, Dr Williams calls for a full-scale attack on the parasite using the compound Methoprene which can kill a colony of fleas by preventing young insects from growing up.

The alert was raised initially by American scientists who discovered that fleas could absorb dangerous micro-organisms through the stomach wall. Until then the flea's gut had been considered an unbreachable barrier.

Now Dr Williams's colleague, Dr John Maunder, said the biggest concern for humans was murine fever which is rife in run-down inner city areas and mice being crowded together.

The disease is spread by the mouse flea which transmits it to a rat, that may in turn be bitten by a hungry cat flea, which may next take a nip at a human.

"The fever is a bit like ten doses of flu in one, though not usually fatal except those already ill or elderly," said Dr Maunder.

"The surprising thing is that murine fever has not come to Britain, say to Brixton or Toxteth. We should prevent it before it does."

He added: "The trouble is people don't have any idea about flea control. Children even get a tapeworm through crawling across the floor."

A great quantity of fleas can also prove as bad as a few diseased ones, and thus heavily infested animals are more susceptible to illnesses such as cat flu. Kittens in particular are at risk.

A flea collar, said Dr Maunder, was only an amelioration, not a cure. But Methoprene, which is being marketed as an aerosol under the brand name Aclaim, could if sprayed in a room in the absence of animals and people get rid of fleas for a year.

VIETNAM

TREATMENT OF SKIN DISEASES BY FOLK MEDICINES REPORTED

Ho Chi Minh City SAIGON GIAI PHONG in Vietnamese 25 Jun 86 p 1

[Article by Truong Van Tien: "The Dermatology and Venereal Disease Hospital Makes Good Use of Domestic Pharmaceuticals"]

[Text] Among the thousands of patients who come every year to the dermatology and venereal disease hospital for treatment, many are afflicted with scabies, skin ulcers and bacterial infections, and pore folliculitis. Scabies is a rather prevalent, stubbornly recurrent, and highly contagious disease which causes itching and consequently affects job performance, production, study, combat activities, and even sleep. Skin ulcers and bacterial infections cause physical suffering, make it difficult for patients to work and move about, spoil their appetite and disrupt their sleep. What a misery for people afflicted with these skin diseases!

On learning that Dr Huynh Van Truong, head of Clinical Department A of the Municipal Dermatology and Venereal Disease Hospital, had, together with his collaborators in this department, successfully carried out several scientific research projects by "using domestically available vegetal pharmaceuticals instead of importing them from abroad," we came to the hospital for further information and heard about many interesting things.

I asked Dr Truong: "So far, how has your hospital managed to treat these diseases? Have you used domestic or imported pharmaceuticals? Have you had enough of them or has there been any shortage?"

[Dr Truong] As a matter of fact, there are many kinds of medicine for our use. To treat scabies, we have Peru balm, benzoate benzyl, sulphuric ointment, DDT ointment, wilmin liquor, and DEP. To treat skin ulcers and bacterial infections, we have penicillin, aureomycin, and sulfamid ointments. All of these medicines have proven effective. Pore folliculitis is an exception because at present there is no medicine to treat it quite effectively; sometimes we have had to use corticoid but the result obtained has been inconsistent.

[Question] That is true! But they cost us a lot of foreign currency, so their quantity does not meet the need to treat these skin diseases. Therefore, our brothers and sisters here in Clinical Department A of the dermatology and VD hospital have studied folk medicine and have looked for and done research on domestically available pharmaceuticals in the hope of making up for this shortage.

It is in this right direction that Dr Huynh Van Truong and a group of collaborators including Drs Bui Van Duc and Vo Thi Nhu Hue, physicians Nong Thi Vang and Vu Thi Kim Ngan, head nurse Nguyen Ngoc Sau, and nurse Nguyen Van Khai pondered and researched the treatment of skin diseases by some domestic herbs. To date, they have obtained fundamental success from three meticulous scientific research projects.

In the first project, they used a mixture with 30 percent of citronella oil to treat scabies. A heartening result was obtained by using this medicine to treat 100 patients who had been afflicted with this disease for 7 days up to 12 years. After 2 to 4 days of treatment, almost all patients had less itching, their skin was less rough, and pimples vanished gradually. After the shortest treatment of 5 days and the longest one of 52 days, all rough and pussy pimples disappeared, followed by the growth of a new, thin skin layer.

In the second project, calophyllum inophyllum oil was used to treat skin ulcers and bacterial infections. Of 69 inpatients who had been afflicted with these diseases for about 1 year and up to 10 years and who were experimentally treated with this medicine, 56 (81.2 percent) were cured, 7 (10.1 percent) had their disease severity diminished by two-thirds, and 6 (8.7 percent) felt only a slight abatement.

In the third project, a mixture with 30 percent of citronella oil was used to treat pore folliculitis. After 1 year of treatment, of 54 patients who had been afflicted with this disease for 6 days--the shortest period--up to 23 days--the longest period--49 (90.7 percent) were cured and the remaining 5 (8.3 percent) either felt only some abatement of their disease or could not be healed at all. After the first day of treatment, when the medicine was applied, most patients felt a little less itching, which then subsided gradually with each passing day until complete healing.

According to Dr Huynh Van Truong, both the citronella and the calophyllum inophyllum oils proved safe and did not cause any adverse reaction among the patients.

[Question] Is it now possible for all hospitals to apply these scientific projects extensively?

[Answer] In my opinion, treatment of skin diseases by calophyllum inophyllum oil may be applied widely because it is not very expensive. However, I am still perplexed about citronella oil because it is still scarce and rather costly, so it is probably still difficult to use it extensively to treat skin diseases.

[Question] Nevertheless, is citronella oil, like calophyllum inophyllum oil, a pharmaceutical which is available in our own country and which we need not spend foreign economy to import?

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HONG KONG

RABIES DRIVE TO COVER DOGS ON FISHING VESSELS

Hong Kong HONGKONG STANDARD in English 31 Jul 86 p 5

[Text]

DESPITE the probability of being declared rabies-free within a few days, Hongkong will extend its anti-rabies inoculation drive to cover dogs on fishing vessels.

The mobile inoculation teams of the Agriculture and Fisheries Department will make boat-to-boat visits in various fishing ports of the territory next month. Rural villages in Tai Po and fish culture zones in Sai Kung will also be included.

The senior veterinary officer of the department, Dr Norman Cheng said a high percentage of the floating canine population will be vaccinated in the drive, as most fishing vessels will return for the Tin Hau Festival next month.

Since 1981, the first year for taking a record of vaccinated dogs on board vessels, 1,897 have received anti-rabies inoculations.

The last indigenous outbreak of rabies in animals occurred in August 1984 in Fan Ling. Two cases of rabies in human beings were reported at that time.

According to the World Health Organisation, an area can be considered rabies-free if there is no new outbreak of rabies for two years. This will allow Hongkong to be cleared from the blacklist on Monday.

Under the Dogs and Cats Ordinance, dog owners failing to inoculate and license their dogs over five-months' old are liable to prosecution. Conviction carries a maximum fine of \$5,000 plus six months' imprisonment.

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CSO: 5450/0195

SWEDEN

IBR-IPV CATTLE VIRUS REPORTED IN COUNTRY FOR FIRST TIME

Stockholm DAGENS NYHETER in Swedish 9 Aug 86 p 6

[Article by Lasse Granestrand]

[Text] An infectious disease called IBR-IPV, not previously found in Sweden, has been discovered in 65 cows on a farm in Vastergotland.

"It is a dreaded disease and it is distressing that we now have it in Sweden," said Ernst Mehnert, veterinarian at the Board of Agriculture.

IBR-IPV is a viral infection that affects the animals' air passages and reproductive organs. Young animals may die and older animals risk having stillborn calves.

The disease is highly contagious and may have serious economic consequences. It has destroyed 400 herds in Switzerland. The disease does not spread to humans, however, and the meat can be consumed.

The infection at the farm in Vastergotland, which has a total of 300 animals, was discovered in late June. Next week a decision will be made concerning the slaughter of the 65 infected animals. It is feared that an additional four herds have been infected.

"The infection is insidious. Many of my animals showed no other symptoms than a runny nose," the owner of the affected farm told DAGENS NYHETER. If the infection spreads, it could be extremely costly to the industry.

It is unclear how the infection reached this country.

"We have ruled out the possibility that the infection could have come to Sweden by way of imported sperm," said Ernst Mehnert, veterinarian at the Board of Agriculture. Instead, it may have come in pharmaceuticals from Canada.

The pharmaceuticals are used in advanced breeding techniques and contain serum from cows that may have been infected. The substance is used to rinse eggs out of breeding cows, so that the eggs can then be implanted in other cows.

"The business end of cattle raising has become so technically advanced that biological considerations are an afterthought," Ernst Mehnert said. Fewer people are now involved, meaning fewer eyes observing the animals--and this does not favor the prevention of infection.

IBR-IPV is viewed as an epidemic animal disease, which means that an animal owner can be forced to slaughter his infected animals. The owner receives compensation from the government, however.

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CSO: 5400/2555

END